MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

SERIAL NO. 9/701622

FILING DATE

	AS FILED		AFTER 1st AMENDMENT		AFTER		CLAIM	
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DEP. TOTAL CLAIMS		1200 55000							
CLAIMS		277							

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

Barbara Campbell Netional Stage Processing (703) 305-3831